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| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1: Identify Yourself | | | |
|-----|---|---|------|---|
| | | About Debtor 1: | Ab | out Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's | Stuart First name | Firs | st name |
| | license or passport). | N Middle name | Mic | ddle name |
| | Bring your picture identification to your meeting with the trustee. | Emanuel Last name and Suffix (Sr., Jr., II, III) | Las | st name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years | , | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-3540 | | |

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Case number (if known)

Debtor 1 Stuart N Emanuel

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | |
|----|--|---|--|--|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | □ I have not used any business name or EINs. FDBA Emanuel Neuman Group FDBA Neuvista Holdings LLC FDBA Neuvista Group II LLC Business name(s) EINs | ☐ I have not used any business name or EINs. Business name(s) EINs | | |
| 5. | Where you live | 1032 Mar Lane Drive Lake Forest, IL 60045 | If Debtor 2 lives at a different address: | | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code | | |
| | | Lake | | | |
| | | County | County | | |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. | | |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code | | |
| 6. | Why you are choosing this district to file for | Check one: | Check one: | | |
| | bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | | |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | | |
| | | | | | |

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Case number (if known) Debtor 1 Stuart N Emanuel

| Check one, (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filling for Bankruptcy Bankruptcy Code you are choosing to file under Chapter 17 | ar | Tell the Court About | our B | ankruptcy Ca | ise | | | | |
|--|------------|---|-------|----------------------------------|--|--|---|---------|--|
| Chapter 11 Chapter 12 Chapter 13 Will pay the fee | 7. | Bankruptcy Code you are | | | | | | | |
| Chapter 12 Chapter 13 | | choosing to file under | | | | | | | |
| Chapter 13 Will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more detail about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or more order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Difcial Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may but is not required to, waive your fee, and may do so only if your income is less than 150% of the official povery line if applies to your family size and you are unable to pay the fee in installments. If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. No. Yes. | | | | | | | | | |
| I will pay the fee | | | □ с | hapter 12 | | | | | |
| about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mone order. If your attorney may pay with a credit card or check will a pre-printed address. Ineed to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). Irequest that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may but is not required to, waive your fee, and may do so only if your income is less than 150% of the Official power line in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. No. | | | □ с | hapter 13 | | | | | |
| about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or mone order. If your attorney may pay with a credit card or check will a pre-printed address. Ineed to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). Irequest that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may but is not required to, waive your fee, and may do so only if your income is less than 150% of the Official power line in the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. No. | | | | | | | | | |
| The Filing Fee in Installments (Official Form 103A). | 3. | How you will pay the fee | | about how your order. If your | ou may pay. Typ attorney is subr | ically, if you are paying the fee yo | urself, you may pay with cash, cashier's check, or n | noney | |
| but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line of applies to your family size and you are unable to pay the fee in installments.) If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. No. No. Yes. District When Case number No See see spending or being filed by a spouse who is not filling this case with you, or by a business partner, or by an affiliate? Debtor District When Case number, if known Debtor District When Case number, if known | | | | | | | n, sign and attach the Application for Individuals to | Pay | |
| Have you filed for bankruptcy within the last 8 years? | | | | but is not req applies to you | uired to, waive y ur family size an | your fee, and may do so only if you nd you are unable to pay the fee in | ur income is less than 150% of the official poverty linestallments). If you choose this option, you must fi | ne that | |
| District | | Have you filed for | | | | | | | |
| District When Case number District When Case number District When Case number | <i>,</i> . | bankruptcy within the | _ ` | | | | | | |
| District When Case number District When Case number | | last 8 years? | ∐ Ye | | | 14// | | | |
| District When Case number No | | | | | | | | | |
| No Yes. Yes. No Yes. Yes. No Yes. Yes. No Yes. Yes. Yes. Yes. Yes. Yes. No Yes. Y | | | | | | | | | |
| cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? Debtor | | | | DISTRICT | | when | Case number | | |
| filed by a spouse who is not filling this case with you, or by a business partner, or by an affiliate? Debtor District Debtor Debtor District Debtor Debto | 10. | | ■ No |) | | | | | |
| Debtor | | filed by a spouse who is not filing this case with you, or by a business partner, or by an | ☐ Ye | es. | | | | | |
| District | | aπiliate? | | Debtor | | | Relationship to you | | |
| Debtor | | | | | | When | | - | |
| I1. Do you rent your residence? □ No. Go to line 12. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? □ No. Go to line 12. □ Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this | | | | | | | | | |
| residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this | | | | District | | When | Case number, if known | | |
| residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12. Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this | | | | | | | | | |
| ■ Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ■ No. Go to line 12. □ Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this | 11. | | □No | o. Go to I | ine 12. | | | | |
| Yes. Fill out <i>Initial Statement About an Eviction Judgment Against You</i> (Form 101A) and file it with this | | residence? | ■ Ye | es. Has yo | our landlord obta | ained an eviction judgment against | you and do you want to stay in your residence? | | |
| _ | | | | | No. Go to line | 12. | | | |
| | | | | | | | ludgment Against You (Form 101A) and file it with th | nis | |

Document Page 4 of 61 Case number (if known) Stuart N Emanuel Debtor 1 Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs

immediate attention?

For example, do you own perishable goods, or livestock that must be fed,

or a building that needs urgent repairs?

Number, Street, City, State & Zip Code

needed, why is it needed?

Where is the property?

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Debtor 1 Stuart N Emanuel

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

Case number (if known)

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 61 Case number (if known) Debtor 1 Stuart N Emanuel Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. ☐ Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Do you estimate that Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25.001-50.000 1-49 you estimate that you **5001-10.000 5**0.001-100.000 **50-99** owe? **1**0.001-25.000 ☐ More than 100.000 **1**00-199 **200-999** 19. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50.000 estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50.000.001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** ☐ More than \$50 billion □ \$100.000.001 - \$500 million □ \$500.001 - \$1 million 20. How much do you □ \$0 - \$50,000 □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion estimate your liabilities □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$100,001 - \$500,000 □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,000,001 - \$500 million ■ More than \$50 billion ■ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Stuart N Emanuel Signature of Debtor 2 Stuart N Emanuel Signature of Debtor 1 Executed on June 8, 2017 Executed on

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 Stuart N Emanuel Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Daniel | J Winter | Date | June 8, 2017 | |
|----------------|------------------------|---------------|--------------------|--|
| Signature of | Attorney for Debtor | | MM / DD / YYYY | |
| Daniel J W | /inter | | | |
| Printed name | | | | |
| Law Office | es of Daniel J Winter | | | |
| Firm name | | | | |
| 53 W Jack | son Boulevard | | | |
| Suite 718 | | | | |
| Chicago, I | L 60604 | | | |
| | City, State & ZIP Code | | | |
| Contact phone | 312-427-1613 | Email address | djw@dwinterlaw.com | |
| 6208223 | | | | |
| Bar number & S | tate | | | |

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| Deb | otor 1 Stuart N Emanuel | | | Case number (#k | nown) | | | |
|----------|--|---|---|---|---|--|--|--|
| Par | t 6: Answer These Quest | ons for R | eporting Purposes | | | | | |
| | What kind of debts do you have? | 16a. | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | |
| | | | No. Go to line 16b. | | | | | |
| | | | ☐ Yes. Go to line 17. | | | | | |
| | | 16b. | Are your debts primarily business money for a business or investmen | ss debts? Business debts are debts that It or through the operation of the business | you incurred to obtain a or investment. | | | |
| | | | ☐ No. Go to line 16c. | | | | | |
| | | | Yes. Go to line 17. | | | | | |
| | | 16c. | State the type of debts you owe the | at are not consumer debts or business de | bbts | | | |
| 17. | Are you filing under Chapter 7? | □ No. | I am not filing under Chapter 7. Go | to line 18. | | | | |
| | Do you estimate that after any exempt property is excluded and | ≅ Yes. | | estimate that after any exempt property to distribute to unsecured creditors? | is excluded and administrative expenses | | | |
| | administrative expenses are paid that funds will | | III No | | | | | |
| | be available for distribution to unsecured creditors? | | ☐ Yes | | | | | |
| 18. | How many Creditors do | 1 -49 | | 1,000-5,000 | 25,001-50,000 | | | |
| | you estimate that you owe? | ☐ 50-99 ☐ 100-1 ☐ 200-9 | 99 | ☐ 5001-10,000 ☐ 10,001-25,000 | ☐ 50,001-100,000 ☐ More than100,000 | | | |
| 19. | How much do you estimate your assets to | 50- \$ | • | ☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million | \$500,000,001 - \$1 billion \$1,000,000,001 - \$10 billion | | | |
| | be worth? | ☐ \$100, | 101 - \$100,000 1,001 - \$500,000 1,001 - \$1 million | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | | |
| 20. | How much do you estimate your (labilities | □ \$0 - \$ □ \$50.0 | 550,000 001 - \$100,000 | ☐ \$1,000,001 - \$10 million ☐ \$10,000,001 - \$50 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion | | | |
| | to be? | | ,001 - \$500,000 | □ \$50,000,001 - \$100 million | □ \$10,000,000,001 - \$50 billion | | | |
| | | \$500, | ,001 - \$1 million | ☐ \$100,000,001 - \$500 million | ☐ More than \$50 billion | | | |
| Par | t7: Sign Below | • | | | | | | |
| For | . Aon | I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. | | | | | | |
| | | if I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. | | | | | | |
| | | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). | | | | | | |
| I reques | | | est relief in accordance with the chapter of title 11, United States Code, specified in this petition. | | | | | |
| | | | icy case can result in thes up/to \$25 | ealing property, or obtaining money or pro 0,000, or imprisonment for up to 20 years | operty by fraud in connection with a s, or both. 18 U.S.C. §§ 152, 1341, 1519, | | | |
| | - | | N-Emandel e of Debtor 1 | Signature of Debtor 2 | | | | |
| | | Execute | d on 0608/201 | Executed on MM / DI | D/YYY | | | |

| | DOCUM | <u>-ni Pade 9 oi 6 i</u> | | |
|--------------------------|----------------------------|---|---|---|
| rmation to identify your | case: | | | |
| Stuart N Emanue | I | | | |
| First Name | Middle Name | Last Name | | |
| | | | | |
| First Name | Middle Name | Last Name | | |
| ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| | | | | |
| | | | | ☐ Check if this is an amended filing |
| | Stuart N Emanue First Name | Stuart N Emanuel First Name Middle Name First Name Middle Name | Stuart N Emanuel First Name Middle Name Last Name First Name Middle Name Last Name | Stuart N Emanuel First Name Middle Name Last Name First Name Middle Name Last Name |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a | ssets of what you own |
|-----|---|------------|--------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 22,550.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 22,550.00 |
| Pai | rt 2: Summarize Your Liabilities | | |
| | | | abilities at you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 19,990.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 21,832.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 689,376.00 |
| | Your total liabilities | \$ | 731,198.00 |
| Pai | rt 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 7,781.17 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 8,229.00 |
| Pai | Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other sc | hedules. |
| 7. | ■ Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. | personal | , family, or |
| | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Page 10 of 61 Case number (if known) Document Debtor 1 Stuart N Emanuel

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form | | |
|----|--|----|--|
| | 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14. | \$ | |
| | | - | |

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total c | laim |
|--|---------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 21,832.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 21,832.00 |

| | | | Document | Page 11 of 61 | | | |
|--------------------|---------------|---------------------------|------------------------------------|---|---|-----------------------|---|
| Fill in t | this inform | ation to identify your | case and this filing: | | | | |
| Debtor | 1 | Stuart N Emanue | I | | | | |
| | | First Name | Middle Name | Last Name | | | |
| Debtor (Spouse, | _ | First Name | Middle Name | Last Name | | | |
| (Spouse, | ii iiiiig) | Filst Name | Middle Name | Last Name | | | |
| United | States Ban | kruptcy Court for the: | NORTHERN DISTRICT OF | ILLINOIS | | | |
| Case n | umber | | | | | | Check if this is an |
| 000011 | | | | | | ш | amended filing |
| | | | | | | | · · |
| ~ · · · | – | 4.00 A /D | | | | | |
| Offic | ial For | m 106A/B | | | | | |
| Sch | edule | e A/B: Prop | erty | | | | 12/15 |
| | | | | . If an asset fits in more than o | | | |
| | | | | eople are filing together, both a On the top of any additional pag | | | |
| | every quest | | a coparate choos to time formit | on the top of any additional pag | oo, mno your name and t | Juoo mun | inder (ii kinewin). |
| Part 1: | Describe E | ach Residence. Building | , Land, or Other Real Estate Yo | u Own or Have an Interest In | | | |
| | | | ,, _aa, o. oooao | | | | |
| . Do yo | ou own or ha | ave any legal or equitabl | e interest in any residence, build | ding, land, or similar property? | | | |
| ■ No | o. Go to Part | 2 | | | | | |
| _ | | the property? | | | | | |
| | | and proporty. | | | | | |
| Part 2: | Describe Y | our Vehicles | | | | | |
| 3. Cars □ No ■ Ye |) | cks, tractors, sport u | tility vehicles, motorcycles | | | | |
| 3.1 | Make: N | Mercedes | Who has an interest | in the property? Check one | Do not deduct secure | d claims | or exemptions. Put |
| | make. | 3540 | | in the property? Check one | the amount of any sec Creditors Who Have (| | |
| | | 009 | Debtor 1 only ☐ Debtor 2 only | | | | |
| | Approximate | | ,000 Debtor 1 and Debt | or 2 only | Current value of the entire property? | | rrent value of the rtion you own? |
| (| Other inform | ation: | At least one of the | · · · · | | - | - |
| 1 | 1/2 with W | Vife | Check if this is co | ommunity property | \$15,000.00 | 0 | \$15,000.00 |
| | nples: Boats | | | vehicles, other vehicles, and s, snowmobiles, motorcycle a | | | |
| | I the dollar | | | es from Part 2, including an | | | \$15,000.00 |
| | | | | | | | |
| Part 3: | | our Personal and Hous | | | | | |
| Do yoι | ı own or h | ave any legal or equit | able interest in any of the fo | ollowing items? | | porti Do no | ent value of the on you own? ot deduct secured s or exemptions. |

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

Case 17-18048 Filed 06/14/17 Entered 06/14/17 10:19:59 Document Page 12 of 61 Debtor 1 Case number (if known) Stuart N Emanuel Yes. Describe..... \$1,500.00 Household goods and furnishings- 5 rooms 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... \$500.00 TV, laptop computer, cell phone 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... clothes \$100.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe..... Dog \$50.00 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2,150.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own?

Schedule A/B: Property

Doc 1

Official Form 106A/B

page 2

Do not deduct secured

Desc Main

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Case number (if known) Document Debtor 1 Stuart N Emanuel claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... Cash \$75.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes..... **Northern Trust Checking** \$25.00 17.1. **Bank of America** \$500.00 17.2. Checking 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No

21. Retirement or pension accounts

☐ Yes. List each account separately.

Type of account: Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company

Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

□ No

Institution name or individual: ■ Yes.

> Residential lease Joseph Passalino - rent to be retained due to

default

23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

■ No Issuer name and description. ☐ Yes.....

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes.....

page 3

\$4,800.00

| De | ebtor 1 | Stuart N Emanuel | DOC 1 | Document | Page 14 of 61 | e number (if known) | Desc Main |
|-----|-----------------|---|---------------------------------|-------------------------|--|--------------------------|---|
| | | | | | | _ | |
| | ■ No | | | y (other than anythin | g listed in line 1), and rig | hts or powers exerc | cisable for your benefit |
| | ☐ Yes. | Give specific information a | bout them | | | | |
| 26. | | , copyrights, trademarks les: Internet domain names | | | | | |
| | ☐ Yes. | Give specific information a | bout them | | | | |
| 27. | | es, franchises, and other les: Building permits, exclu | | | n holdings, liquor licenses, | professional licenses | ; |
| | _ | Give specific information a | bout them | | | | |
| M | oney or p | property owed to you? | | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax refu | unds owed to you | | | | | |
| | ■ No | | | | | | |
| | ⊔ Yes. (| Sive specific information at | oout them, inclu | ding whether you alrea | ady filed the returns and the | e tax years | |
| | ■ No | les: Past due or lump sum | • • • | al support, child suppo | ort, maintenance, divorce so | ettlement, property s | ettlement |
| | ☐ Yes. 0 | Give specific information | | | | | |
| 30. | | mounts someone owes y les: Unpaid wages, disabili benefits; unpaid loans | ty insurance pa | | efits, sick pay, vacation pay | y, workers' compens | ation, Social Security |
| | ☐ Yes. | Give specific information | | | | | |
| 31. | | s in insurance policies les: Health, disability, or life | e insurance; hea | alth savings account (I | HSA); credit, homeowner's | , or renter's insurance | е |
| | Yes. N | Name the insurance compa Com | any of each polic pany name: | cy and list its value. | Beneficiary: | | Surrender or refund value: |
| | | Terr | n Life insuraı | nce on job | Wife | | \$0.00 |
| | If you a someor | erest in property that is done the beneficiary of a living the has died. Give specific information | | | d surance policy, or are curre | ently entitled to receiv | e property because |
| | Example ■ No | against third parties, who les: Accidents, employmen Describe each claim | | | t or made a demand for p to sue | payment | |
| | | | ed claims of ev | verv nature, including | g counterclaims of the de | ebtor and rights to s | set off claims |
| | ■ No | Describe each claim | | . e. y mararo, moradin | , James oranio or the de | und righte to s | or o |
| | | ancial assets you did not | already liet | | | | |
| JÜ. | ■ No | anoiai asseis you uid flot | ancauy IISI | | | | |

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Case 17-18048

| | Case 17-18048 Doc 1 Filed 06/14/17 Entered 06/14/17 10:19:59 Document Page 15 of 61 | Desc Main |
|---------------|---|--------------------------|
| Debto | or 1 Stuart N Emanuel Case number (if known |) |
| | Yes. Give specific information | |
| | Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here | \$5,400.00 |
| Part 5 | Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. | |
| 37. Do | you own or have any legal or equitable interest in any business-related property? | |
| I | No. Go to Part 6. | |
| | Yes. Go to line 38. | |
| | | |
| Part 6 | Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. | |
| 46. D | o you own or have any legal or equitable interest in any farm- or commercial fishing-related property? | |
| _ | No. Go to Part 7. | |
| | Yes. Go to line 47. | |
| | | |
| Part 7 | Describe All Property You Own or Have an Interest in That You Did Not List Above | |
| | o you have other property of any kind you did not already list? | |
| | Examples: Season tickets, country club membership | |
| | No Year Cive appositio information | |
| | Yes. Give specific information | |
| 54. | Add the dollar value of all of your entries from Part 7. Write that number here | \$0.00 |
| | | 40.00 |
| Part 8 | List the Totals of Each Part of this Form | |
| | | |
| | Part 1: Total real estate, line 2 | \$0.00 |
| | Part 2: Total vehicles, line 5 \$15,000.00 | |
| | Part 4: Total financial access line 36 \$2,150.00 | |
| | Part 4: Total financial assets, line 36 \$5,400.00 Part 5: Total business-related property, line 45 \$0.00 | |
| | Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 | |
| | Part 7: Total other property not listed, line 54 + \$0.00 | |
| | Total personal property. Add lines 56 through 61 \$22,550.00 Copy personal property | total \$22,550.00 |
| 63. | Total of all property on Schedule A/B. Add line 55 + line 62 | \$22,550.00 |

Official Form 106A/B Schedule A/B: Property page 5

| Fill in this infor | mation to identify your | case: | | |
|---------------------|--------------------------|-------------------|-------------|-------------------------------------|
| Debtor 1 | Stuart N Emanue | I | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | ☐ Check if this is a amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify | the Pro | perty You | u Claim a | s Exempt |
|---------|----------|---------|-----------|-----------|----------|
|---------|----------|---------|-----------|-----------|----------|

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | | Specific laws that allow exemption |
|--|--------------------------------------|-----|---|------------------------------------|
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 2009 Mercedes E3540 63,000 miles 1/2 with Wife | \$15,000.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) |
| Line from Schedule A/B: 3.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Household goods and furnishings- 5 rooms | \$1,500.00 | | \$1,500.00 | 735 ILCS 5/12-1001(b) |
| Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| TV, laptop computer, cell phone | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) |
| Life from Schedule AVB. 111 | | | 100% of fair market value, up to any applicable statutory limit | |
| clothes Line from Schedule A/B: 11.1 | \$100.00 | | | 735 ILCS 5/12-1001(a) |
| Line from Scriedule A/B. 11.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Dog Line from Schedule A/B: 13.1 | \$50.00 | | \$50.00 | 735 ILCS 5/12-1001(b) |
| Line nom <i>Schedule A/D</i> . 19.1 | | | 100% of fair market value, up to any applicable statutory limit | |

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Case number (if known)

| | Otaait it Emanas | | | | |
|----|--|--------------------------------------|---------|---|------------------------------------|
| | Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | | | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| | Cash Line from Schedule A/B: 16.1 | \$75.00 | | \$75.00 | 735 ILCS 5/12-1001(b) |
| | Line nom schedule Arb. 10.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Northern Trust Checking Line from Schedule A/B: 17.1 | \$25.00 | | \$25.00 | 735 ILCS 5/12-1001(b) |
| | Line from Scriedule Arb. 17.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Checking: Bank of America | \$500.00 | | \$500.00 | 735 ILCS 5/12-1001(b) |
| | Life from Schedule PAB. 17.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| | Term Life insurance on job Beneficiary: Wife | \$0.00 | | | 215 ILCS 5/238 |
| | Line from Schedule A/B: 31.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| 3. | Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every ■ No Yes. Did you acquire the property cove | 3 years after that for ca | ises fi | • | , |
| | ☐ Yes | | | | |

| Date (| debt was incurred | Opened 05/15 Last Active 2/28/17 | Last 4 digits of account nu | umber 1000 | | | |
|------------------|--|--|--|-----------------------|--|--|--------------------------|
| | neck if this claim re ommunity debt | | ☐ Other (including a right to offset) |) | | | |
| | least one of the deb | | ☐ Judgment lien from a lawsuit | _ | | | |
| _ | ebtor 1 and Debtor 2 | | Statutory lien (such as tax lien, r | mechanic's lien) | | | |
| □ De | ebtor 2 only | | car loan) | | 4.04 | | |
| | ebtor 1 only | TIOOK OHO. | An agreement you made (such a | - | ured | | |
| Who | owes the debt? C | Check one | ☐ Disputed Nature of lien. Check all that appl | lv. | | | |
| | Number, Street, City, S | State & Zip Code | Unliquidated | | | | |
| | Ft Worth, TX 7 | - | □ Contingent | | | | |
| | Po Box 96124 | 5 | As of the date you file, the claim apply. | is: Check all that | | | |
| | Creditor's Name | | 2009 Mercedes E3540 63,0 1/2 with Wife | 000 miles | | | |
| 2.1 | USA | nounter | Describe the property that secure | es the claim: | \$19,990.00 | \$15,000.00 | \$4,990.00 |
| for ea | ch claim. If more th | an one creditor has claims in alphabeti | more than one secured claim, list the s a particular claim, list the other credi cal order according to the creditor's n | itors in Part 2. As | Amount of claim Do not deduct the value of collateral. | Value of collateral that supports this claim | Unsecured portion If any |
| Part | | ured Claims | | | Column A | Column B | Column C |
| | Yes. Fill in all of | f the information | below. | | | | |
| | No. Check this | box and submit t | his form to the court with your oth | ner schedules. Yo | ou have nothing else to | o report on this form. | |
| | any creditors have | • | , , , , | | | | |
| s nee | | | If two married people are filing togoout, number the entries, and attach | | | | |
| | cial Form 10 nedule D: | | Who Have Claims | s Secured | by Property | у | 12/15 |
| ~··· | | | | | | amen | ded filing |
| Case (if know | number | | | | | _ | c if this is an |
| Unite | d States Bankrup | tcy Court for the: | NORTHERN DISTRICT OF | ILLINOIS | | | |
| | . 0, | st Name | Middle Name | Last Name | | | |
| Debte | | st Name | Middle Name | Last Name | | | |
| Debte | | tuart N Emanu | iel | | | | |
| Fill ir | this information | n to identify yoເ | ır case: | | | | |
| | Case : | 17-18048 | Doc 1 Filed 06/14/1 | L7 Entered Page 18 | d 06/14/17 10:: of 61 | 19:59 Desc N — | /lain |

Add the dollar value of your entries in Column A on this page. Write that number here: \$19,990.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here: \$19,990.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| | | Document | Page 19 | of 61 | • | |
|--|---|--|---|-------------------------------|------------------------|----------------------------|
| Fill in this infor | mation to identify your c | ase: | | | | |
| Debtor 1 | Stuart N Emanuel | | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| Jnited States Ba | ankruptcy Court for the: | NORTHERN DISTRICT OF ILL | INOIS | | | |
| Case number | | | | | | |
| if known) | | | | | ☐ Check amend | if this is an ed filing |
| Official Forn | | | | | | |
| Schedule E | F: Creditors W | ho Have Unsecured | Claims | | | 12/15 |
| eft. Attach the Cor ame and case nu | ntinuation Page to this page | red by Property. If more space is r e. If you have no information to rep secured Claims | | | | |
| | ors have priority unsecured | | | | | |
| ☐ No. Go to F | . , | | | | | |
| Yes. | | | | | | |
| identify what ty possible, list th | rpe of claim it is. If a claim has ne claims in alphabetical order | If a creditor has more than one prior both priority and nonpriority amount according to the creditor's name. If ticular claim, list the other creditors in | ts, list that claim you have more tl | here and show both priority a | and nonpriority amount | ts. As much as |
| (For an explan | ation of each type of claim, se | ee the instructions for this form in the | instruction book | (let.) Total claim | Priority amount | Nonpriority amount |
| Revenu Revenu | Department of ue(BK12 | Last 4 digits of accour | nt number | \$191.00 | \$191.00 | \$0.00 |
| PO Box | reditor's Name c 64388 o, IL 60664-0338 | When was the debt inc | curred? 20° | 16 | _ | |
| | Street City State Zlp Code | As of the date you file, | , the claim is: C | Check all that apply | | |
| Who incurre | d the debt? Check one. | ☐ Contingent | | | | |
| Debtor 1 | only | ☐ Unliquidated | | | | |
| Debtor 2 | only | ☐ Disputed | | | | |
| Debtor 1 | and Debtor 2 only | Type of PRIORITY uns | ecured claim: | | | |
| ☐ At least or | ne of the debtors and another | □ Domestic support ob | oligations | | | |
| ☐ Check if | this claim is for a communi | ity debt Taxes and certain of | ther debts you o | we the government | | |
| | subject to offset? | <u> </u> | • | while you were intoxicated | | |
| ■ No | | Other. Specify | | | | |
| ☐ Yes | | | come taxes | | | |

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Debtor 1 Stuart N Emanuel Case number (if know) Illinois Department of 2.2 \$89.00 \$89.00 \$0.00 Revenue(BK12 Last 4 digits of account number Priority Creditor's Name PO Box 64388 When was the debt incurred? 2015 Chicago, IL 60664-0338 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify Income taxes ☐ Yes 2.3 Last 4 digits of account number \$2,437.00 \$2,437.00 \$0.00 Irs Priority Creditor's Name PO Box 7346 When was the debt incurred? 2016 Philadelphia, PA 19107-7317 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No ☐ Other. Specify ☐ Yes Income taxes 2.4 Last 4 digits of account number \$1,618.00 \$0.00 Irs \$1,618.00 Priority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only ☐ Domestic support obligations ☐ At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt ☐ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No

☐ Yes

Income taxes

Other. Specify

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Debtor 1 Stuart N Emanuel Case number (if know) 2.5 \$0.00 Last 4 digits of account number \$17,497.00 \$17,497.00 Priority Creditor's Name PO Box 7346 When was the debt incurred? Philadelphia, PA 19101-7346 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Type of PRIORITY unsecured claim: ☐ Debtor 1 and Debtor 2 only ☐ Domestic support obligations At least one of the debtors and another Taxes and certain other debts you owe the government ☐ Check if this claim is for a community debt $oxedsymbol{\square}$ Claims for death or personal injury while you were intoxicated Is the claim subject to offset? ■ No Other. Specify ☐ Yes 2014 Income taxes Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? □ No. You have nothing to report in this part. Submit this form to the court with your other schedules. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Total claim 4.1 **Amex** Last 4 digits of account number \$37,931.00 7113 Nonpriority Creditor's Name Opened 09/74 Last Active Correspondence Po Box 981540 When was the debt incurred? 3/28/14 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes

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Case number (if know)

| DCDIO | Stuart N Emanuel | | Case Harriber (ii know) | | |
|-------|---|---|--|-------------|--|
| 4.2 | Amex | Last 4 digits of account number | 2753 | \$22,662.00 | |
| | Nonpriority Creditor's Name Correspondence Po Box 981540 El Paso, TX 79998 | When was the debt incurred? | Opened 11/74 Last Active 3/18/14 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | |
| | Who incurred the debt? Check one. | _ | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d ala: | | |
| | At least one of the debtors and another | Student loans | a Claiiii. | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | |
| | ☐ Yes | Other. Specify Credit Card | I- Case # 15 M1 104291 | | |
| 4.3 | Bmw Bank Of North Amer | Last 4 digits of account number | 1835 | \$17,413.00 | |
| | Nonpriority Creditor's Name 2735 E Parleys Ways Ste Salt Lake City, UT 84109 | When was the debt incurred? | Opened 10/02 Last Active 11/21/13 | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | ☐ Yes | Other Specify Credit Card | | | |
| 4.4 | Certified Services Inc | Last 4 digits of account number | 72Q1 | \$18.00 | |
| | Nonpriority Creditor's Name Po Box 177 Waukegan, IL 60079 | When was the debt incurred? | Opened 09/11 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | □ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | ■ No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | □Yes | Other, Specify | Attorney Global Medical Imaging | | |

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Debtor 1 Stuart N Emanuel Case number (if know) 4.5 \$4,000.00 **Charles Schwab** Last 4 digits of account number Nonpriority Creditor's Name 500 22nd Street When was the debt incurred? Oak Brook, IL 60523 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Line of Credit ☐ Yes 4.6 **Chase Card** Last 4 digits of account number \$32,019.00 3791 Nonpriority Creditor's Name Attn: Correspondence Dept Opened 07/96 Last Active 11/29/13 Po Box 15298 When was the debt incurred? Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Credit Card ☐ Yes 4.7 **Chase Card Services** Last 4 digits of account number 4999 \$26,866.00 Nonpriority Creditor's Name Opened 03/03 Last Active Attn: Correspondence Po Box 15278 When was the debt incurred? 11/29/13 Wilmington, DE 19850 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent □ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Credit Card ☐ Yes

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Debtor 1 Stuart N Emanuel Case number (if know) 4.8 \$700.00 **Chris Scott** Last 4 digits of account number Nonpriority Creditor's Name **Keysight Technologies** When was the debt incurred? 1400 Fountaingrove Pkway Santa Rosa, CA 95403 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts No ■ Other. Specify Web Design ☐ Yes 4.9 City of Chicago Parking Last 4 digits of account number \$1,000.00 Nonpriority Creditor's Name PO Box 88292 When was the debt incurred? Chicago, IL 60680 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Parking tickets ☐ Yes 4.1 \$35.00 City of Chicago Speed Enforcement Last 4 digits of account number Nonpriority Creditor's Name **Dept of Finance** When was the debt incurred? POBox 88292 Chicago, IL 60680-1292 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not debt Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Other. Specify Ticket

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Case number (if know)

| Debtoi | Stuart N Emanuel | | Case Hamber (II know) | |
|--------|--|------------------------------------|---|------------|
| 4.1 | Diversified Consultant | Last 4 digits of account number | 8805 | \$118.00 |
| | Nonpriority Creditor's Name Dci | When was the debt incurred? | Opened 1/30/17 | |
| | Po Box 551268 | | opened 1700/11 | |
| | Jacksonville, FL 32255 | _ | | |
| | Number Street City State ZIp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | • | |
| | Yes | ■ Other. Specify Collection | Attorney Directv | |
| 4.1 | Dsnb Bloomingdales | Lord Police of Control | 8971 | \$852.00 |
| 2 | Nonpriority Creditor's Name | Last 4 digits of account number | | φ032.00 |
| | Attn: Bankruptcy | | Opened 12/01 Last Active | |
| | Po Box 8053 | When was the debt incurred? | 12/23/14 | |
| | Mason, OH 45040 | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | |
| | _ | | | |
| | Debtor 1 only | Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | No | Debts to pension or profit-sharing | • | |
| | Yes | Other. Specify Charge Acc | count | |
| 4.1 | Edify Technologies Inc | Last 4 digits of account number | | \$1,000.00 |
| 3 | Nonpriority Creditor's Name | Last 4 digits of account number | | Ψ1,000.00 |
| | Sivasankar Moopanar | When was the debt incurred? | | |
| | 2200 S Main St | | | |
| | Lombard, IL 60148 | | : OL | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | IS: Check all that apply | |
| | _ | | | |
| | Debtor 1 only | Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt | | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | na plana and other similar date. | |
| | No | Debts to pension or profit-sharin | | |
| | □ Yes | Other. Specify Business of | lebt | |

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Case number (if know)

| Debto | Stuart N Emanuel | | Case number (if know) | |
|-------|---|-------------------------------------|---|--------------------|
| 4.1 | Forestrecvy | Lord A Political Control of Control | 8103 | \$98.00 |
| 4 | Nonpriority Creditor's Name | Last 4 digits of account number | | \$90.00 |
| | Po Box 83 | When was the debt incurred? | Opened 7/23/15 | |
| | Barrington, IL 60011 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | ☐ Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | Yes | ■ Other. Specify Ophthalmo | logy Partners Ltd | |
| 4.1 | Illinois Dept of Revenue Bankruptcy | | | \$48.858.00 |
| 5 | Nonpriority Creditor's Name | Last 4 digits of account number | | \$40,030.00 |
| | PO Box 64388 | When was the debt incurred? | | |
| | Chicago, IL 60664-0338 | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | | 2010-2016 | - Dischargeability to be | |
| | Yes | Other. Specify determined | | |
| 4.1 | Irs | | | \$146,209.00 |
| 6 | Nonpriority Creditor's Name | Last 4 digits of account number | | φ140,209.00 |
| | PO Box 7346 Philadelphia, PA 19101-7346 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | | ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt | ☐ Obligations arising out of a sepa | | |
| | Is the claim subject to offset? | report as priority claims | manon agreement of divolce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | ng plans, and other similar debts | |
| | □ ves | ■ Other Oracit. 2011 Incom | | |

| -4 O | Document Page 27 of 61 Case number (if know) | VICIII |
|--|---|----------------------|
| Stuart N Emanuel | Case number (if know) | |
| IRS - For Notice Purposes Only | Last 4 digits of account number | \$0.00 |
| Nonpriority Creditor's Name Department of the Treasury-IRS 12th Street & Constitution Ave Washington, DC 20224 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| \square Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | \square Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify Notice | |
| IRS - For Notice Purposes Only | Last 4 digits of account number | \$41,541.00 |
| Nonpriority Creditor's Name Department of the Treasury-IRS 12th Street & Constitution Ave | When was the debt incurred? | V 2.70 2.1100 |
| Washington, DC 20224 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | , | |
| ■ Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | □ Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | □ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | Other. Specify 2012 Income taxes | |
| IDC Nation | | \$07.625.00 |
| IRS- Notice Nonpriority Creditor's Name | Last 4 digits of account number | \$97,635.00 |
| PO Box 7346 | When was the debt incurred? | |
| Philadelphia, PA 19101-7346 | | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | _ | |
| Debtor 1 only | Contingent | |
| Debtor 2 only | Unliquidated | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |

debt

■ No

☐ Yes

 $\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify 2009 Income taxes

Is the claim subject to offset?

Document Page 28 of 61 Debtor 1 Stuart N Emanuel Case number (if know) 4.2 **IRS-NOTICE PURPOSE ONLY** \$149,508.00 Last 4 digits of account number 0 Nonpriority Creditor's Name PO BOX 21126 When was the debt incurred? Philadelphia, PA 19114 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify 2010 Income Taxes ☐ Yes 4.2 Joseph Passalino Sr \$50,000.00 Last 4 digits of account number Nonpriority Creditor's Name 5104 W Grand Ave #14 When was the debt incurred? Gurnee, IL 60031 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Landlord - to reject balance of lease ☐ Yes 4.2 Lake Forest Health & Fitness \$400.00 Last 4 digits of account number Nonpriority Creditor's Name 1200 N Westmoreland When was the debt incurred? Lake Forest, IL 60045 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims

■ No

☐ Yes

■ Other. Specify Health club dues

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

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Page 29 of 61 Document Case number (if know) Debtor 1 Stuart N Emanuel 4.2 Mercedes-Benz Financial 5001 \$6,591.00 Last 4 digits of account number 3 Nonpriority Creditor's Name Opened 2/20/12 Last Active Po Box 685 When was the debt incurred? 8/14/15 Roanole, TX 76262 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Auto Lease ☐ Yes 4.2 Midland Funding 3007 \$529.00 Last 4 digits of account number Nonpriority Creditor's Name Attn: Bankruptcy When was the debt incurred? **Opened 08/15** Po Box 939069 San Diego, CA 92193 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ No **Factoring Company Account Capital One** ☐ Yes Other. Specify N.A. 4.2 **Northwestern Medicine** \$1,288.00 Last 4 digits of account number Nonpriority Creditor's Name 28155 Network Place When was the debt incurred? Chicago, IL 60673-1281 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community

■ No

☐ Yes

report as priority claims

Other. Specify

 $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not

 $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts

Medical

Is the claim subject to offset?

Document Page 30 of 61 Debtor 1 Stuart N Emanuel Case number (if know) 4.2 **Northwestern Memorial Hospital** \$0.00 Last 4 digits of account number 6 Nonpriority Creditor's Name P.O. Box 73690 When was the debt incurred? Chicago, IL 60673-7690 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical - Notice ☐ Yes 4.2 **Paul Fischl DDS** \$1,405.00 Last 4 digits of account number Nonpriority Creditor's Name 636 Church St When was the debt incurred? Evanston, IL 60201 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Dental Services ☐ Yes 4.2 **Real Time Resolutions** 9873 \$0.00 Last 4 digits of account number 8 Nonpriority Creditor's Name Attn: Bankruptcy Opened 5/21/07 Last Active Po Box 36655 When was the debt incurred? 10/29/12 Dallas, TX 75235 Number Street City State ZIp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not

■ No

☐ Yes

report as priority claims

 \square Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Mary's Road, Mettawa IL- Notice

Real Estate Foreclousre for 25780 Saint

Is the claim subject to offset?

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Page 31 of 61 Case number (if know) Document Debtor 1 Stuart N Emanuel

| Susan Spritz Myers | Last 4 digits of account nur | mber | \$700.00 |
|---|---|--|-------------------------|
| Nonpriority Creditor's Name PO Box 383 | When was the debt incurred | d? | |
| Glencoe, IL 60022 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the o | claim is: Check all that apply | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unse | ecured claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt | Obligations arising out of | a separation agreement or divorce that you did not | |
| Is the claim subject to offset? | report as priority claims | , | |
| ■ No | Debts to pension or profit- | sharing plans, and other similar debts | |
| □Yes | Other. Specify Speaking | ing fees | |
| Part 3: List Others to Be Notified About a D | ebt That You Already Listed | | |
| 5. Use this page only if you have others to be notified is trying to collect from you for a debt you owe to have more than one creditor for any of the debts the notified for any debts in Parts 1 or 2, do not fill out | someone else, list the original cred nat you listed in Parts 1 or 2, list the | litor in Parts 1 or 2, then list the collection agency | here. Similarly, if you |
| Name and Address | On which entry in Part 1 or Part 2 d | lid you list the original creditor? | |
| ARS National Services Inc | Line 4.12 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Clair | ns |
| PO Box 469100 Escondido, CA 92046-9100 | | Part 2: Creditors with Nonpriority Unsecured | Claims |
| L300110100, 0A 32040-3100 | Last 4 digits of account number | | |
| Name and Address Bank of America | On which entry in Part 1 or Part 2 d Line 4.28 of (<i>Check one</i>): | iid you list the original creditor? Part 1: Creditors with Priority Unsecured Clain | ms |
| c/oCodilis & Associates PC 15 W 030 North Frontage Rd #100 Burr Ridge, IL 60527 | | ■ Part 2: Creditors with Nonpriority Unsecured (| Claims |
| | Last 4 digits of account number | | |
| Name and Address | On which entry in Part 1 or Part 2 d | , | |
| GC Services | Line 4.12 of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Clair | |
| PO Box 3855 Houston, TX 77253 | | Part 2: Creditors with Nonpriority Unsecured | Claims |
| 110000011, 17.11200 | Last 4 digits of account number | | |
| Name and Address | On which entry in Part 1 or Part 2 d | lid you list the original creditor? | |
| Harris & Harris | Line 4.25 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Clair | ms |
| 111 W Jackson Blvd #400 | | Part 2: Creditors with Nonpriority Unsecured | Claims |
| Chicago, IL 60604-4134 | Last 4 digits of account number | | |
| Name and Address | On which entry in Part 1 or Part 2 d | lid you list the original creditor? | |
| Harvard Collection | Line 4.15 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Clair | ns |
| 4839 N. Elston Ave | | ■ Part 2: Creditors with Nonpriority Unsecured | Claims |
| Chicago, IL 60630 | Last 4 digits of account number | | |
| Name and Address | On which entry in Part 1 or Part 2 d | lid you list the original creditor? | |
| Ira Nevel | Line 4.28 of (<i>Check one</i>): | ☐ Part 1: Creditors with Priority Unsecured Clair | ns |
| 175 N. Franklin St Suite 201 | | ■ Part 2: Creditors with Nonpriority Unsecured | Claims |
| Chicago, IL 60606 | | | |
| | Last 4 digits of account number | | |
| Name and Address | On which entry in Part 1 or Part 2 d | lid you list the original creditor? | |
| Midland Credit Mgmt | Line 4.24 of (<i>Check one</i>): | Part 1: Creditors with Priority Unsecured Clair | ms |
| 2365 Northside Drive #300 | | ■ Part 2: Creditors with Nonpriority Unsecured | Claims |
| San Diego, CA 92108 | Last 4 digits of account number | | |
| | | | |

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| Debtor 1 Stuart N Emanuel | | Case number (if know) | | | | | |
|--|--|---|--|--|--|--|--|
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | | |
| MRS Associates Inc | Line 4.7 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | | |
| 1930 Olney Ave Cherry Hill, NJ 08003 | | ■ Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| | Last 4 digits of account number | | | | | | |
| Name and Address | On which entry in Part 1 or Part 2 did you list the original creditor? | | | | | | |
| Nationwide Credit Inc | Line 4.6 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | | |
| PO Box 26315 Lehigh Valley, PA 18002-6315 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| Lenigh Valley, FA 10002 0010 | Last 4 digits of account number | | | | | | |
| Name and Address | On which entry in Part 1 or Part 2 did | you list the original creditor? | | | | | |
| Zwicker & Assocates PC (IL) | Line 4.2 of (Check one): | ☐ Part 1: Creditors with Priority Unsecured Claims | | | | | |
| 7366 N Lincoln Ave #404 Lincolnwood, IL 60712 | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | | |
| Ellioonimood, ie oor ie | Last 4 digits of account number | | | | | | |

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

| | | | | Total Claim |
|--------------|-----|---|-----|------------------|
| | 6a. | Domestic support obligations | 6a. | \$ 0.00 |
| Total claims | | | | |
| from Part 1 | 6b. | Taxes and certain other debts you owe the government | 6b. | \$ 21,832.00 |
| | 6c. | Claims for death or personal injury while you were intoxicated | 6c. | \$ 0.00 |
| | 6d. | Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ 0.00 |
| | 6e. | Total Priority. Add lines 6a through 6d. | 6e. | \$ 21,832.00 |
| | | | | Total Claim |
| | 6f. | Student loans | 6f. | \$ 0.00 |
| Total claims | | | | |
| from Part 2 | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ 0.00 |
| | 6h. | · | 6h. | \$ 0.00 |
| | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here. | 6i. | \$ 689,376.00 |
| | 6j. | Total Nonpriority. Add lines 6f through 6i. | 6j. | \$ 689,376.00 |

| | | 170.0.11111. | | | | | |
|---|--------------------------|-------------------|-------------|--|--|--|--|
| Fill in this information to identify your case: | | | | | | | |
| Debtor 1 Stuart N Emanuel | | | | | | | |
| | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | | |
| Case number | | | | | | | |
| (if known) | | | | | | | |
| | | | | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| P | erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code | State what the contract or lease is for |
|-----|---|---|
| 2.1 | Joseph Passalino Sr 5104 W Grand Ave #14 Gurnee, IL 60031 | Residential Lease- Lake Forest- to reject lease |
| 2.2 | Mercedes-Benz Financial Po Box 685 Roanole, TX 76262 | Auto Lease |

| | | Docume | nt Page 34 of | 61 |
|----------------|--|--|------------------------------|---|
| Fill in thi | s information to identify your | case: | | |
| Debtor 1 | Stuart N Emanue | I | | |
| DCD(O) | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, f | iling) First Name | Middle Name | Last Name | |
| United St | ates Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case nur | nhar | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| | al Form 106H dule H: Your Cod | ebtors | | 42/45 |
| Scrie | dule H. Toul Cou | enroi 2 | | 12/15 |
| our nam | and number the entries in the e and case number (if known) you have any codebtors? (If | . Answer every question. | • | this page. On the top of any Additional Pages, write |
| 1. 50 | you have any codebiors: (ii | you are ming a joint case, o | o not list ettiler spouse at | s a codebior. |
| □ No ■ Ye | | | | |
| | ithin the last 8 years, have you ona, California, Idaho, Louisiana, | | | (Community property states and territories include to, and Wisconsin.) |
| | 0 | | | |
| | o. Go to line 3. | and the section of th | with a second that the o | |
| LI YE | es. Did your spouse, former spor | use, or legal equivalent live | with you at the time? | |
| in lir Forn | ne 2 again as a codebtor only i | f that person is a guarant | or or cosigner. Make su | your spouse is filing with you. List the person shown are you have listed the creditor on Schedule D (Official G). Use Schedule D, Schedule E/F, or Schedule G to fil |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| | | | | |
| 3.1 | Marg Emanuel | | | Schedule D, line 2.1 |
| | 1032 Mar Lane Drive | | | ☐ Schedule E/F, line |
| | Lake Forest, IL 60045 | | | ☐ Schedule G |
| | | | | Santander Consumer USA |
| | | | | |
| 3.2 | Marg Emanuel | | | ☐ Schedule D, line |
| | 1032 Mar Lane Drive | | | Schedule E/F, line4.21 |
| | Lake Forest, IL 60045 | | | ☐ Schedule G |
| | | | | Joseph Passalino Sr |

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| Fill in this information | tion to identify your case: | |
|---------------------------------|--|---|
| Debtor 1 | Stuart N Emanuel | |
| Debtor 2 (Spouse, if filing) | | |
| United States Bar | nkruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | |
| Case number | | Check if this is: |
| (If known) | | ☐ An amended filing |
| | | ☐ A supplement showing postpetition chapter 13 income as of the following date: |
| Official Fo | orm 106l | MM / DD/ YYYY |
| Schedule | I: Your Income | 12/15 |
| Be as complete a | and accurate as possible. If two married people are filing together ([| Debtor 1 and Debtor 2), both are equally responsible for |

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | 1: Describe Employment | | | |
|-----------------------|--|--------------------|--|-------------------------------|
| 1. | Fill in your employment information. | | Debtor 1 | Debtor 2 or non-filing spouse |
| | If you have more than one job, | Employment status | ■ Employed | ☐ Employed |
| | attach a separate page with information about additional | Employment status | ☐ Not employed | ■ Not employed |
| | employers. | Occupation | Account Manager | |
| | Include part-time, seasonal, or self-employed work. Employer's name | | Compsych Corp/National Behavior Mgmt | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 425 Cityfront Plaza Chicago, IL 60611 | |
| How long employed the | | ere? 2 weeks | | |

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 6,248.67 \$ 0.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

Official Form 106I Schedule I: Your Income page 1

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| Debt | tor 1 | Stuart N Emanuel | - | | Case | e number (if kr | nown) | | | | | |
|------|-----------------|---|----------|-----|-----------|-----------------|--------------|------|--------------------------|---------------------|----------------|--------------|
| | | | | | Fo | r Debtor 1 | | | or Debtor on-filing s | | | |
| | Сор | y line 4 here | 4. | | \$_ | 6,248 | 3.67 | \$ | g | | .00 | |
| 5. | List | all payroll deductions: | | | | | | | | | | |
| ٥. | 5a. | Tax, Medicare, and Social Security deductions | 58 | 2 | \$ | 1,061 | 1 67 | \$ | | 0 | .00 | |
| | 5b. | Mandatory contributions for retirement plans | 5k | | \$ - | | 0.00 | \$ | | | .00 | |
| | 5c. | Voluntary contributions for retirement plans | 50 | | \$_ | | 0.00 | \$ | | | .00 | |
| | 5d. | Required repayments of retirement fund loans | 50 | | \$ | | 0.00 | \$ | | | .00 | |
| | 5e. | Insurance | 56 | | \$ | | 2.83 | \$ | | | .00 | |
| | 5f. | Domestic support obligations | 5f | i. | \$ | | 0.00 | \$ | | | .00 | |
| | 5g. | Union dues | 50 | g. | \$ | | 0.00 | \$ | | | .00 | |
| | 5h. | Other deductions. Specify: | 5ł | ո.+ | \$ | (| 0.00 | + \$ | | 0 | .00 | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | | \$ | 1,254 | 1.50 | \$ | | 0 | .00 | |
| 7. | Calc | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | | \$ | 4,994 | 1.17 | \$ | | 0 | .00 | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends | 8a 8l | | \$_ \$ | | 0.00 0.00 | \$ | | | 0.00 | |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce | | | _ | | | • | | | | |
| | | settlement, and property settlement. | 80 | Э. | \$ | (| 0.00 | \$ | | 0 | .00 | |
| | 8d. | Unemployment compensation | 80 | d. | \$ | | 0.00 | \$ | | | .00 | |
| | 8e. | Social Security | 86 | э. | \$ | 1,987 | 7.00 | \$ | | 800 | | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | 8f | | \$_ | | 0.00 | \$ | | | .00 | |
| | 8g. | Pension or retirement income | 86 | _ | \$_ | | 0.00 | \$ | | | .00 | |
| | 8h. | Other monthly income. Specify: | _ 8r | Դ.+ | \$_ | | 0.00 | + ⊅ | | | .00 | |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | . [| \$ | 1,987 | 7.00 | \$ | | 80 | 0.00 | |
| 10 | Calc | culate monthly income. Add line 7 + line 9. | 10. | \$ | | 6,981.17 | 2 4 | | 800.00 | _ 9 | | 7,781.17 |
| 10. | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | Ψ- | | 0,301.17 | • • | | 000.00 | | | 7,701.17 |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule ade contributions from an unmarried partner, members of your household, your refriends or relatives. Not include any amounts already included in lines 2-10 or amounts that are not a cify: | dep | | | | | | Schedule | ∍ <i>J</i> . +\$ | | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rest e that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | | | | \$ | | 7,781.17 |
| 13. | Dov | ou expect an increase or decrease within the year after you file this form | ? | | | | | | | | mbine nthly | ed income |
| 13. | I | No. | • | | | | | | | | | |
| | _ | Yes Explain: | | | | | | | | | | |

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| | in this informa | tion to identify yo | our casa: | | | 1 | | |
|-------|--|---------------------------------------|------------------------|--|--|----------------------|----------------------|---|
| Deb | | Stuart N Em | | | | Ch | eck if this is: | |
| Deb | tor r | Stuart N Em | anuei | | | | An amended filing | |
| | tor 2 ouse, if filing) | | | | | | | wing postpetition chapter the following date: |
| `' | , 0, | . 0 . (. ! | NODTI | IEDAL DICTRICT OF ILLIAN | OIS | | | |
| Unite | ed States Bankr | uptcy Court for the | : NORTE | HERN DISTRICT OF ILLIN | OIS | | MM / DD / YYYY | |
| | e number nown) | | | | | | | |
| Of | fficial Fo | rm 106J | | | | | | |
| | | J: Your | | | | | | 12/1 |
| info | rmation. If m | | eded, atta | . If two married people and the control of the cont | | | | |
| Part | | ibe Your House | hold | | | | | |
| 1. | Is this a joir | | | | | | | |
| | ■ No. Go to □ Yes. Doe | | in a separ | ate household? | | | | |
| | □ N □ Y | | st file Offic | ial Form 106J-2, <i>Expenses</i> | s for Separate House | ehold of De | btor 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | names. | | | Wife | | 68 | ■ Yes |
| | | | | | | | | □ No □ Yes |
| | | | | | | | | □ No |
| | | | | | | | | ☐ Yes |
| | | | | | | | | □ No |
| 3. | Do your ove | enses include | _ | | | | | ☐ Yes |
| Э. | expenses o | f people other to d your depende | han $_{\square}$ | No Yes | | | | |
| | imate your ex | | our bankr | uptcy filing date unless y | | | | |
| | enses as of a dicable date. | a date after the l | bankrupto | y is filed. If this is a supp | olemental <i>Schedule</i> | e <i>J</i> , check t | the box at the top o | of the form and fill in the |
| the | ude expense value of sucl ficial Form 10 | n assistance an | non-cash d have ind | government assistance i cluded it on <i>Schedule I:</i> Y | f you know Your Income | | Your exp | enses |
| 4. | | or home owners and any rent for th | | nses for your residence. I or lot. | nclude first mortgag | e 4. | \$ | 2,800.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. | \$ | 0.00 |
| | | rty, homeowner's | | | | 4b. | · | 0.00 |
| | | | | upkeep expenses | | 4c. | · | 0.00 |
| 5 | | owner's associat | | dominium dues our residence. such as ho | ime equity loops | 4d. 5. | · | 0.00 |
| J. | | uaue Daviili | anna iui v | an resouchte. SUCH AS DO | one econy idans | ;). | w | 11 1111 |

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| ebtor 1 | Stuart N Emanuel | Case num | ber (if known) | |
|---------|--|--------------|----------------|----------------------------|
| Utilit | ties: | | | |
| 6a. | Electricity, heat, natural gas | 6a. | \$ | 350.00 |
| 6b. | Water, sewer, garbage collection | 6b. | \$ | 75.00 |
| 6c. | Telephone, cell phone, Internet, satellite, and cable services | 6c. | \$ | 280.00 |
| 6d. | Other. Specify: | 6d. | | 0.00 |
| Food | d and housekeeping supplies | 7. | \$ | 600.00 |
| | dcare and children's education costs | 8. | | 0.00 |
| | hing, laundry, and dry cleaning | 9. | | 150.00 |
| | conal care products and services | 10. | | 75.00 |
| | ical and dental expenses | 11. | · | 900.00 |
| | sportation. Include gas, maintenance, bus or train fare. | | | |
| | ot include car payments. | 12. | \$ | 550.00 |
| | ertainment, clubs, recreation, newspapers, magazines, and books | 13. | \$ | 75.00 |
| | ritable contributions and religious donations | 14. | \$ | 0.00 |
| Insu | · · | | · — | |
| | ot include insurance deducted from your pay or included in lines 4 or 20. | | | |
| | Life insurance | 15a. | \$ | 0.00 |
| 15b. | Health insurance | 15b. | \$ | 404.00 |
| 15c. | Vehicle insurance | 15c. | \$ | 500.00 |
| 15d. | Other insurance. Specify: | 15d. | \$ | 0.00 |
| | es. Do not include taxes deducted from your pay or included in lines 4 or 20. | | · — | |
| | cify: IRS for portion income taxes | 16. | \$ | 400.00 |
| | allment or lease payments: | | | |
| | Car payments for Vehicle 1 | 17a. | \$ | 545.00 |
| 17b. | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| | Other. Specify: Wife's car | 17c. | \$ | 525.00 |
| | Other. Specify: | 17d. | · · | 0.00 |
| | r payments of alimony, maintenance, and support that you did not report a | | · — | |
| | ucted from your pay on line 5, Schedule I, Your Income (Official Form 106I) | | \$ | 0.00 |
| | er payments you make to support others who do not live with you. | | \$ | 0.00 |
| Spec | pify: | 19. | | |
| Othe | er real property expenses not included in lines 4 or 5 of this form or on Sch | nedule I: Yo | our Income. | |
| 20a. | Mortgages on other property | 20a. | \$ | 0.00 |
| 20b. | Real estate taxes | 20b. | \$ | 0.00 |
| 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| 20d. | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| 20e. | Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| Othe | er: Specify: | 21. | +\$ | 0.00 |
| | | | . • | 0.00 |
| | ulate your monthly expenses | | | |
| 22a. | Add lines 4 through 21. | | \$ | 8,229.00 |
| 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | \$ | |
| 22c. | Add line 22a and 22b. The result is your monthly expenses. | | \$ | 8,229.00 |
| | | | | , |
| | rulate your monthly net income. | | • | |
| | Copy line 12 (your combined monthly income) from Schedule I. | 23a. | | 7,781.17 |
| 23b. | Copy your monthly expenses from line 22c above. | 23b. | -\$ | 8,229.00 |
| | | | | |
| 23c. | Subtract your monthly expenses from your monthly income. | 23c. | \$ | -447.83 |
| | The result is your <i>monthly net income</i> . | 230. | Ψ | 441100 |
| Dov | you expect an increase or decrease in your expenses within the year after y | ou file this | s form? | |
| | xample, do you expect to finish paying for your car loan within the year or do you expect yo | | | ase or decrease because of |
| | fication to the terms of your mortgage? | 5 5 | . , | |
| ■ N | 0. | | | |
| | es. Explain here: Extensive Dental work needed | | | |

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| Fill in this infor | mation to identify your | case: | | | | |
|---------------------|--|--------------------------|---------------|----------------------|-----------------|---|
| Debtor 1 | Stuart N Emanue | | | | | |
| Debtor 2 | First Name | Middle Name | La | st Name | | |
| (Spouse if, filing) | First Name | Middle Name | La | st Name | | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRIC | T OF ILLING | IS | | |
| Case number | | | | | | |
| (if known) | | | | | | ☐ Check if this is an amended filing |
| Official Forr | m 106Dec | | | | | |
| Declarat | tion About a | ın Individual | I Debt | or's Sche | dules | 12/15 |
| Sig | n Below | | | | | |
| Did you pa | ay or agree to pay some | one who is NOT an atto | rney to help | you fill out bankru | ptcy forms? | |
| ■ No | | | | | | |
| ☐ Yes. | Name of person | | | | | ruptcy Petition Preparer's Notice, and Signature (Official Form 119) |
| • | alty of perjury, I declare re true and correct. | that I have read the sun | nmary and s | schedules filed with | this declaratio | n and |
| X /s/ Stu | art N Emanuel | | х | | | |
| | N Emanuel are of Debtor 1 | | | Signature of Debto | r 2 | |
| Date | June 8, 2017 | | | Date | | |

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| Fill in this inform | ation to identify your | case: | | | | |
|---------------------|-------------------------|---------------------------|---|-----------------------|------------|--|
| Debtor 1 | Stuart N Emanue | | | | | |
| Debtor 2 | First Name | Middle Name | Last Name | | | |
| (Spouse if, filing) | First Name | Middle Name | Lust Name | | | |
| United States Ban | kruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | | |
| Case number | Warner | | | | _ | |
| (ii known) | | | | 8 | П | Check if this is an amended filing |
| | | | | | | |
| Official Form | 106000 | | | | | |
| Official Form | | | Dalataula Cal | | | |
| Declarati | on About a | in individual | Debtor's Sch | leaules | | 12/15 |
| If two married peo | ople are filing togethe | r, both are equally respo | nsible for supplying correc | et information. | | |
| You must file this | form whenever you f | ile bankruotov schedules | or amended schedules. N | laking a false stat | ement. co | ncealing property, or |
| obtaining money | or property by fraud I | n connection with a bank | cruptcy case can result in t | | | |
| years, or potn. 16 | U.S.C. §§ 152, 1341, 1 | 519, and 3571. | | | | |
| | | | | | | |
| Sign | Below | | | | | |
| Did you pay | or agree to pay some | one who is NOT an attor | ney to help you fill out bar | kruptcy forms? | | |
| | | | | | | |
| No No | | | | | | |
| ☐ Yes. Na | ame of person | $\overline{}$ | \ | | | tition Preparer's Natice, ature (Official Form 119) |
| | | / | | Deciaration | , and dign | atare (Omolar Form 119) |
| Underspenalt | of perjury. I declare | that Thave read the sum | mary and schedules filed v | with this declaration | on and | |
| that they are | true and correct. | 25 // | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| × G | sea INI | fler | x | | | |
| | I Emanuel | 7, | Signature of De | ebtor 2 | | |
| Signature | of Debtor 1 | 120M | | | | |
| Date | 0/00/ | 73.1 | Date | | | |

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| FIII | in this inforn | nation to identify you | ur case: | | | |
|------------|-------------------------|--|--|------------------------------------|-------------------------------------|------------------------------------|
| Del | btor 1 | Stuart N Emanu | Middle Name | Last Name | | |
| Del | btor 2 | i iist ivaine | Wildele Warrie | Lastivanie | | |
| | ouse if, filing) | First Name | Middle Name | Last Name | | |
| Uni | ited States Ba | nkruptcy Court for the | : NORTHERN DISTRICT C | OF ILLINOIS | | |
| Ca | se number | | | | | |
| (if kr | nown) | | | | _ | Check if this is an |
| | | | | | a | mended filing |
| f | ficial Ea | rm 107 | | | | |
| | ficial Fo | | Affairs for Individ | luals Filing for B | ankruntov | 4/16 |
| Be a | as complete a | and accurate as poss | sible. If two married people a , attach a separate sheet to t | re filing together, both are | equally responsible for sup | plying correct |
| Pai | t 1: Give D | Details About Your M | arital Status and Where You | Lived Before | | |
| 1. | What is you | r current marital stat | us? | | | |
| | ■ Married | | | | | |
| | □ Not mar | | | | | |
| 2. | During the la | ast 3 years, have you | ı lived anywhere other than v | where you live now? | | |
| | □ No | | | | | |
| | | at all of the places you | lived in the last 3 years. Do no | ot include where you live now | <i>ı</i> . | |
| | Dobtor 1 Pr | ior Address: | Dates Debtor 1 | Debtor 2 Prior Ad | dross | Dates Debtor 2 |
| | Debior 111 | ioi Address. | lived there | Debior 21 Hor Ac | ui ess. | lived there |
| | 210 E Pea Chicago, I | | From-To: 2013-2016 | ☐ Same as Debtor | l. | ☐ Same as Debtor 1 From-To: |
| 3. stat | es and territori | ies include Árizona, Ca | ever live with a spouse or leg alifornia, Idaho, Louisiana, Nev schedule H: Your Codebtors (Of | vada, New Mexico, Puerto R | | |
| Pai | t 2 Explai | n the Sources of Yo | ur Income | | | |
| 4. | Fill in the total | al amount of income yo | mployment or from operating ou received from all jobs and a unhave income that you receive | all businesses, including part | time activities. | ndar years? |
| | □ No | | | | | |
| | Yes. Fill | in the details. | | | | |
| | | | Debtor 1 | | Debtor 2 | |
| | | | Sources of income | Gross income | Sources of income | Gross income |
| | | | Check all that apply. | (before deductions and exclusions) | Check all that apply. | (before deductions and exclusions) |
| | | r year before that: ecember 31, 2015) | ☐ Wages, commissions, bonuses, tips | \$11,243.00 | ☐ Wages, commissions, bonuses, tips | |
| | | | Operating a business | | ☐ Operating a business | |

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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| Debtor 1 | | Debtor 2 | | |
|--|---|--|---|--|
| Sources of income Check all that apply. | Gross income (before deductions and exclusions) | Sources of income Check all that apply. | Gross income (before deductions and exclusions) | |

Did you receive any other income during this year or the two previous calendar years?

Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

П Nο

Yes. Fill in the details.

| Debtor 1 Sources of income Describe below. | Gross income from each source (before deductions and exclusions) | Debtor 2 Sources of income Describe below. | Gross income (before deductions and exclusions) |
|--|--|--|---|
| Cancelled debt | \$828.00 | | |

For the calendar year before that: (January 1 to December 31, 2015)

Cancelled debt

\$828.00

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

- Are either Debtor 1's or Debtor 2's debts primarily consumer debts?
 - Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

 \square No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

- * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.
- Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

□ No.

□ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

| Creditor's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Was this payment for |
|---|------------------|-------------------|----------------------|---|
| Santander Consumer USA Po Box 961245 Ft Worth, TX 76161 | Monthly | \$545.00 | \$19,990.00 | □ Mortgage ■ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other |

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| Deh | otor 1 | Stuart N Emanuel | Document I | Page 43 of 61 | e number (if known) | | |
|-----|----------------------|---|---|--|---|-----------------------------------|--|
| DOL | 7.01 | Stuart N Emanuel | | | c namber (# known) | | |
| 7. | <i>Inside</i> of whi | n 1 year before you filed for bankruptcers include your relatives; any general parch you are an officer, director, person in a iness you operate as a sole proprietor. 11 my. | tners; relatives of any gen control, or owner of 20% o | eral partners; partne or more of their voting | rships of which you securities; and an | u are a genera ly managing a | al partner; corporations gent, including one for |
| | | No | | | | | |
| | | Yes. List all payments to an insider. | | | | | |
| | Insid | ler's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for | this payment |
| 8. | inside Includ | le payments on debts guaranteed or cosi | | ments or transfer a | ny property on ac | count of a de | ebt that benefited an |
| | | es. List all payments to an insider | | | | | |
| | Insid | ler's Name and Address | Dates of payment | Total amount paid | Amount you still owe | Reason for Include cred | this payment itor's name |
| Par | t 4: | Identify Legal Actions, Repossession | s, and Foreclosures | | | | |
| 9. | List al modifi | n 1 year before you filed for bankrupto I such matters, including personal injury of ications, and contract disputes. No Yes. Fill in the details. | y, were you a party in an cases, small claims action: | ny lawsuit, court act s, divorces, collection | ion, or administra | ative proceed ctions, suppor | ing? t or custody |
| | Case | e title e number | Nature of the case | Court or agency | | Status of the case | |
| | Ame | ex v. Debtor 11 107718 | Collection | Circuit Court of Cook County | | ■ Pending □ On appeal □ Concluded | |
| 10. | Check | n 1 year before you filed for bankrupto call that apply and fill in the details below No. Go to line 11. Yes. Fill in the information below. | | erty repossessed, fo | oreclosed, garnis | hed, attached | I, seized, or levied? |
| | Cred | itor Name and Address | Describe the Property | | Date | | Value of the |
| | | | Explain what happened | d | | | property |
| 11. | accol | n 90 days before you filed for bankrup unts or refuse to make a payment beca No Yes. Fill in the details. | | luding a bank or fin | ancial institution | , set off any a | mounts from your |

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

Describe the action the creditor took

No

Creditor Name and Address

☐ Yes

Amount

Date action was

taken

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| Pai | rt 5: List Certain Gifts and Contributions | | | | | | | |
|---|--|--|-----------------------------------|---------------------------|--|--|--|--|
| Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. | | | | | | | | |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value | | | | |
| | Person to Whom You Gave the Gift and Address: | | | | | | | |
| 14. | Within 2 years before you filed for bankruptcy ☐ No ☐ Yes. Fill in the details for each gift or contrib | , did you give any gifts or contributions with a tota | al value of more than | \$600 to any charity? | | | | |
| | Gifts or contributions to charities that total | Describe what you contributed | Dates you | Value | | | | |
| | more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | contributed | | | | | |
| | Salvation Army | clothes | 2015, 2016 | \$600.00 | | | | |
| Pa 15. | List Certain Losses Within 1 year before you filed for bankruptcy or gambling? | or since you filed for bankruptcy, did you lose any | thing because of the | ft, fire, other disaster, | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | |
| | how the loss occurred Inclu | cribe any insurance coverage for the loss de the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost | | | | |
| Pa | t 7: List Certain Payments or Transfers | | | | | | | |
| 16. | consulted about seeking bankruptcy or prepa | did you or anyone else acting on your behalf pay ouring a bankruptcy petition? ers, or credit counseling agencies for services require | | rty to anyone you | | | | |
| | □ No | | | | | | | |
| | Yes. Fill in the details. | | | | | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment | | | | |
| | Law Offices of Daniel J Winter 53 W Jackson Boulevard Suite 718 Chicago, IL 60604 djw@DWinterLaw.com Son and daughters | Attorney Fees | various | \$5,000.00 | | | | |
| 17. | Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you lead to the contract of the contr | | or transfer any prope | rty to anyone who | | | | |
| | No | | | | | | | |
| | Yes. Fill in the details. Person Who Was Paid | Description and value of any property | Date payment | Amount of | | | | |
| | Address | transferred | or transfer was made | payment | | | | |

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| Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than patransferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your propert include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. | | | | | | |
|---|---|--|--|-------------|--|---|
| | Person Who Received Transfer Address Person's relationship to you | Description and v property transfer | | paym | ribe any property or ents received or debts n exchange | Date transfer was made |
| 19. | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details. | | | | | e of which you are a |
| | Name of trust | Description and v | alue of the pro | perty trans | sferred | Date Transfer was made |
| Par | t 8: List of Certain Financial Accounts, In | struments Safe Denosit | Boyes and St | orago Unic | he. | made |
| | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, ohouses, pension funds, cooperatives, associon No Yes. Fill in the details. | or other financial accou | nts; certificates | of deposi | - | |
| | Name of Financial Institution and Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account or instrument | | Date account was closed, sold, moved, or transferred | Last balance before closing or transfer |
| | Fifth Third Bank 38 Fountain Square Plaza Cincinnati, OH 45202 | XXXX- | XXXX- ☐ Checking ☐ Savings ☐ Money Marl ☐ Brokerage ☐ Other | | 3/2017 | \$1,300.00 |
| 21. | Do you now have, or did you have within 1 yearsh, or other valuables? | year before you filed for | bankruptcy, ar | ny safe de | posit box or other depo | sitory for securities, |
| | Yes. Fill in the details. | | | | | |
| | Name of Financial Institution Address (Number, Street, City, State and ZIP Code) | Who else had acc Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? |
| 22. | Have you stored property in a storage unit o ■ No □ Yes. Fill in the details. | or place other than your | home within 1 | year befo | re you filed for bankrup | otcy? |
| | Name of Storage Facility Address (Number, Street, City, State and ZIP Code) | Who else has or h to it? Address (Number, S State and ZIP Code) | | Describe | the contents | Do you still have it? |

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Debtor 1 **Stuart N Emanuel**

| Par | 19: Identify Property You Hold or Control for | Someone Else | | | | | | | |
|-----|--|---|--|-----------------------|--|--|--|--|--|
| 23. | Do you hold or control any property that some for someone. | one else owns? Include any proper | rty you borrowed from, are storing fo | r, or hold in trust | | | | | |
| | NoYes. Fill in the details. | | | | | | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value | | | | | |
| Par | t 10: Give Details About Environmental Inform | nation | | | | | | | |
| For | the purpose of Part 10, the following definitions | s apply: | | | | | | | |
| | Environmental law means any federal, state, o toxic substances, wastes, or material into the regulations controlling the cleanup of these su | air, land, soil, surface water, ground | | | | | | | |
| | Site means any location, facility, or property as to own, operate, or utilize it, including disposa | • | law, whether you now own, operate, | or utilize it or used | | | | | |
| | Hazardous material means anything an environ hazardous material, pollutant, contaminant, or | nmental law defines as a hazardous | s waste, hazardous substance, toxic | substance, | | | | | |
| Rep | ort all notices, releases, and proceedings that y | ou know about, regardless of whe | n they occurred. | | | | | | |
| 24. | Has any governmental unit notified you that yo | ou may be liable or potentially liable | e under or in violation of an environm | ental law? | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) Governmental unit Address (Number, Street, City, State and ZIP Code) Environmental law, if you know it zIP Code) | | | | | | | | |
| 25. | Have you notified any governmental unit of an | y release of hazardous material? | | | | | | | |
| | No No | | | | | | | | |
| | Yes. Fill in the details. | | | | | | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice | | | | | |
| 26. | Have you been a party in any judicial or admin | istrative proceeding under any env | ironmental law? Include settlements | and orders. | | | | | |
| | ■ No □ Yes. Fill in the details. | | | | | | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case | | | | | |
| Par | t11: Give Details About Your Business or Co | nnections to Any Business | | | | | | | |
| 27. | Within 4 years before you filed for bankruptcy, | did you own a business or have ar | ny of the following connections to an | y business? | | | | | |
| | ■ A sole proprietor or self-employed in a | - | | | | | | | |
| | ☐ A member of a limited liability compan | y (LLC) or limited liability partnersh | ip (LLP) | | | | | | |
| | ☐ A partner in a partnership | | | | | | | | |
| | ☐ An officer, director, or managing executive of a corporation | | | | | | | | |

☐ An owner of at least 5% of the voting or equity securities of a corporation

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Case number (if known) Document Debtor 1 Stuart N Emanuel

| | □ No. None of the above applies. Go to Part 12. | | | | |
|-------------------------|--|---|---|--|--|
| | Yes. Check all that apply above and fi | ill in the details below for each business. | | | |
| | Business Name Address (Number, Street, City, State and ZIP Code) | Describe the nature of the business Name of accountant or bookkeeper | Employer Identification number Do not include Social Security number or ITIN. Dates business existed | | |
| | Self- Consulting DBA Emanuel Neuman Group | Information Technology Consulting | EIN: From-To 2013-2017 | | |
| | Self-Uber Driver | Driver | EIN: | | |
| | | | From-To 2016-17 | | |
| | ■ No ■ Yes. Fill in the details below. Name | otcy, did you give a financial statement to a Date Issued | anyone about your business? Include all financial | | |
| | Address (Number, Street, City, State and ZIP Code) | | | | |
| Part | 112: Sign Below | | | | |
| are to with 18 U. /s/ S | rue and correct. I understand that making | | declare under penalty of perjury that the answers obtaining money or property by fraud in connection ears, or both. | | |
| Date | June 8, 2017 | Date | | | |
| | you attach additional pages to Your Statem | ment of Financial Affairs for Individuals Fili | ng for Bankruptcy (Official Form 107)? | | |
| Did y ■ No | | ot an attorney to help you fill out bankrupto | cy forms? | | |
| _ | | ruptcy Petition Preparer's Notice, Declaration, | and Signature (Official Form 119). | | |

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| Debtor 1 Stuart N Emanuel | | | Case number (# known) | | | |
|---------------------------|--|--------------------|---|--|--|--|
| | | | | | | |
| | ☐ No. None of the abo | ove applies. Go to | Part 12. | | | |
| | Yes. Check all that | apply above and f | ill in the details below for each business. | • | | |
| | Business Name Address | | Describe the nature of the business | Employer identification number Do not include Social Security number or ITIN. | | |
| | (Number, Street, City, State and | 1 ZIP Code) | Name of accountant or bookkeeper | Dates business existed | | |
| | Self- Consulting | _ | Information Technology | EIN: | | |
| | DBA Emanuel Neuma | an Group | Consulting | From-To 2013-2017 | | |
| | Self-Uber Driver | | Driver | EIN: | | |
| | | | | From-To 2016-17 | | |
| | Name Address (Number, Street, City, State and | | Date Issued | | | |
| I hav | Part 12:- Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concessing property, or obtaining money or property by fraud in connection with a bankruptcy)case con-result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. \$5, 152, 1341, 1519, and 3571. | | | | | |
| Sig: Date | Stuart N Emanuel Signature of Debtor 2 Date Date | | | | | |
| ■ N | do les | | | illing for Bankruptcy (Official Form 107)? | | |
| ■ N | o o | | ot an attorney to help you fill out bankru ruptcy Petition Preparer's Notice, Declaratio | | | |

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| Fill in this informa | ation to identify your cas | e: | | | | |
|--|--|-------------------|---------------------|---|-----------------|---|
| Debtor 1 | Stuart N Emanuel First Name | Middle Name | | Last Name | _ | |
| Debtor 2 | | ·····auio i taino | | | _ | |
| (Spouse if, filing) | First Name | Middle Name | | Last Name | | |
| United States Bank | ruptcy Court for the: | NORTHERN DIS | TRICT OF ILI | LINOIS | _ | |
| Case number | | | | | | |
| (if known) | | | | | | Check if this is an amended filing |
| | | | | | | amonaca ming |
| Official For | m 100 | | | | | |
| | | for loals | حاجيبان | Filing Under Che | | |
| Statement | orintention | tor indiv | /iduais | Filing Under Cha | pter 7 | 12/15 |
| If you are an indivi | dual filing under chapte | r 7, you must fi | ll out this for | rm if: | | |
| creditors have o | claims secured by your | property, or | | | | |
| | d personal property and | | | | | |
| whicheve | er is earlier, unless the o | | | r bankruptcy petition or by the da ause. You must also send copies | | |
| on the fo | rm | | | | | |
| | ple are filing together in date the form. | a joint case, bo | oth are equal | lly responsible for supplying corre | ect information | on. Both debtors must |
| • | | K | | taab a aanansta abaat ta thia fann | 0464 | of ann additional name |
| | id accurate as possible. Ir name and case numbe | | s needed, att | tach a separate sheet to this form | . On the top | or any additional pages, |
| Part 1: List You | r Creditors Who Have S | acured Claims | | | | |
| | | | | | | |
| 1. For any creditor information belo | | 1 of Schedule D | : Creditors \ | Who Have Claims Secured by Pro | perty (Officia | al Form 106D), till in the |
| Identify the cred | itor and the property that | is collateral | What do y secures a | you intend to do with the property a debt? | | id you claim the property s exempt on Schedule C? |
| | | | | | | |
| | ntander Consumer US | 3A | | der the property. | | l _{No} |
| name: | | | _ | the property and redeem it. | | l _{Yes} |
| | 2009 Mercedes E3540 | 0 63,000 | | the property and enter into a rmation Agreement. | _ | . 103 |
| property | miles 1/2 with Wife | | ☐ Retain | the property and [explain]: | | |
| securing debt. | | | | | | |
| | r Unexpired Personal P | | | | | |
| | | | | e G: Executory Contracts and Une ses are leases that are still in effe | | |
| | | | | does not assume it. 11 U.S.C. § 36 | | · · · · · · |
| Describe your une | evnired personal proper | ty leases | | | VACID 41: | |
| | expired personal proper | | | | will th | e lease be assumed? |
| Lessor's name: | | n Sr | | | | e lease be assumed? |
| Lessor's name: | Joseph Passalin | o Sr | | | Will the | e lease be assumed? |
| Lessor's name: | | o Sr | | | | |
| | Joseph Passalin | | t to roiset | logeo | ■ No | |
| Lessor's name: Description of lease Property: | Joseph Passalin | | t- to reject | lease | ■ No | |
| Description of lease | Joseph Passalin | e- Lake Fores | t- to reject | lease | ■ No | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 | Stuart N Emanuel | Case number (if known) | |
|----------|------------------|------------------------|--|
| | | | |

Yes

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| Debtor | 1 Stuart N Emanuel | Case number (if known) |
|---------|---|--|
| | | |
| | | |
| | | |
| | | |
| Part 3: | Sign Below | |
| | penalty of perjury, I declare that I have indic y that is subject to an unexpired lease. | ated my intention about any property of my estate that secures a debt and any personal |
| χ /s | / Stuart N Emanuel | X |
| St | tuart N Emanuel | Signature of Debtor 2 |
| Sig | gnature of Debtor 1 | |
| Da | ate June 8, 2017 | Date |

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| Debto | r 1 Stuart N Emanuel | Case number (# known) |
|--------|---|--|
| | | |
| | | |
| | | |
| | _ | |
| Part 3 | Sign Below | |
| | | |
| | pensity of parjury, I declarathat I have indicated my intention : rty that is equiect to an unexpired lease. | about any property of my estate that secures a debt and any personal |
| - | -X/-N/-1 | |
| ΧĘ | Stubri N Erriandel | Signature of Debtor 2 |
| | Signature of Debtor 1 | Signature of Dabon 2 |
| | 20 01 /28/2017 | |
| 1 | Date 06/08/101/ | Date |
| | - / / | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-18048 Doc 1 Filed 06/14/17 Entered 06/14/17 10:19:59 Desc Main Document Page 57 of 61

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

| In re | Stuart N Emanuel | | Case N | lo | | |
|----------------|---|--|--|--|-----------|--|
| | | Debtor(s) | Chapte | 7 | | |
| | DISCLOSURE OF COMPE | NSATION OF ATTO | RNEY FOR | DEBTOR(S) | | |
| c | ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016 ompensation paid to me within one year before the filire rendered on behalf of the debtor(s) in contemplation of | g of the petition in bankruptcy | y, or agreed to be p | aid to me, for services render | red or to | |
| | For legal services, I have agreed to accept | | \$ | 5,500.00 | | |
| | Prior to the filing of this statement I have received | | \$ | 5,500.00 | | |
| | Balance Due | | \$ | 0.00 | | |
| 2. \$ | 335.00 of the filing fee has been paid. | | | | | |
| 3. T | he source of the compensation paid to me was: | | | | | |
| | ☐ Debtor ☐ Other (specify): Maris | Kastanos, Robert Emanu | el and Debtor | | | |
| 4. T | he source of compensation to be paid to me is: | | | | | |
| | ■ Debtor □ Other (specify): | | | | | |
| 5. I | I have not agreed to share the above-disclosed comp | ensation with any other person | n unless they are n | nembers and associates of my | law firm. | |
| | I have agreed to share the above-disclosed compensations copy of the agreement, together with a list of the national control of the agreement. | | | | ïrm. A | |
| 6. I | n return for the above-disclosed fee, I have agreed to re | ve-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: | | | | |
| b. c. d. | Analysis of the debtor's financial situation, and render Preparation and filing of any petition, schedules, stat Representation of the debtor at the meeting of creditor Representation of the debtor in adversary proceeding [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on ho | ement of affairs and plan which ors and confirmation hearing, as and other contested bankrup educe to market value; ex ons as needed; preparatio | th may be required and any adjourned tcy matters; semption planni | ; hearings thereof; ng; preparation and filing | g of | |
| 7. B | y agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis proceeding. | | | inces, or any other adve | rsary | |
| _ | | CERTIFICATION | | | | |
| | certify that the foregoing is a complete statement of an nkruptcy proceeding. | y agreement or arrangement for | or payment to me f | or representation of the debto | or(s) in | |
| Ju | ne 8, 2017 | /s/ Daniel J Wint | er | | _ | |
| Da | te | Daniel J Winter Signature of Attorn Law Offices of E 53 W Jackson B Suite 718 Chicago, IL 6060 312-427-1613 F djw@dwinterlaw Name of law firm | ney Daniel J Winter oulevard D4 ax: 312-663-131 | 2 | - | |

United States Bankruptcy Court Northern District of Illinois

| In re | Stuart N Emanuel | | Case No | | |
|-------|--|---|--------------------------------|---------------|--|
| | | Debtor(s) | Chapter <u>7</u> | | |
| | VERIFICATION OF CREDITOR MATRIX | | | | |
| | | Number of | Creditors: | 47 | |
| | The above-named Debtor(s) (our) knowledge. |) hereby verifies that the list of credi | tors is true and correct to th | ne best of my | |
| Date: | June 8, 2017 | /s/ Stuart N Emanuel Stuart N Emanuel Signature of Debtor | | | |

United States Bankruptcy Court Northern District of Illinois

| | | 1401 there District of Hillion | | |
|-------|--|--|----------------|---------------------------|
| In re | Stuart N Emanuel | | _ Case No. | |
| | | Debtor(s) | Chapter | 7 |
| | VER | IFICATION OF CREDITOR MA | ATRIX | |
| | | Number of C | Creditors: | 47 |
| | The above-named Debtor(s) h (our) knowledge. | nereby verifies that the list of credito | rs is true and | correct to the best of my |
| Date: | 06/08/201 | Stuar i Emanuel Signature of Debtor | <i>P</i> | |

Case 17-18048 Doc 1 Amex Correspondence Po Box 981540

Chicago, IL 60680

Eile do 16/14/17 10: 1/19/15/9 De 16/14/17 10: 1/19/15/9 De 16/14/17 Parktered 06/14/17 10: 1/19/15/9 De 16/14/14/17 Revenue (BK1) PDOSUMBADO Page 60 of 61

PO Box 64388 Chicago, IL 60664-0338

Amex

Correspondence Po Box 981540 El Paso, TX 79998

El Paso, TX 79998

City of Chicago Speed Enforcement

Dept of Finance POBox 88292

Chicago, IL 60680-1292

Illinois Dept of Revenue Bankruptc

PO Box 64388

Chicago, IL 60664-0338

ARS National Services Inc.

PO Box 469100

Escondido, CA 92046-9100

Diversified Consultant

Dci

Po Box 551268 Jacksonville, FL 32255 Ira Nevel

175 N. Franklin St

Suite 201

Chicago, IL 60606

Bank of America

c/oCodilis & Associates PC 15 W 030 North Frontage Rd #100

Burr Ridge, IL 60527

Dsnb Bloomingdales

Attn: Bankruptcy Po Box 8053 Mason, OH 45040 Irs

PO Box 7346

Philadelphia, PA 19101-7346

Bmw Bank Of North Amer 2735 E Parleys Ways Ste

Salt Lake City, UT 84109

Edify Technologies Inc Sivasankar Moopanar 2200 S Main St

Lombard, IL 60148

Irs

PO Box 7346

Philadelphia, PA 19107-7317

Certified Services Inc

Po Box 177

Waukegan, IL 60079

Forestrecvy Po Box 83

Barrington, IL 60011

Irs

PO Box 7346

Philadelphia, PA 19101-7346

Charles Schwab 500 22nd Street

Oak Brook, IL 60523

GC Services PO Box 3855

Houston, TX 77253

Irs

PO Box 7346

Philadelphia, PA 19101-7346

Chase Card

Attn: Correspondence Dept

Po Box 15298

Wilmington, DE 19850

Harris & Harris

111 W Jackson Blvd #400 Chicago, IL 60604-4134

IRS - For Notice Purposes Only Department of the Treasury-IRS 12th Street & Constitution Ave

Washington, DC 20224

Chase Card Services Attn: Correspondence

Po Box 15278

Wilmington, DE 19850

Harvard Collection

4839 N. Elston Ave

Chicago, IL 60630

IRS - For Notice Purposes Only Department of the Treasury-IRS 12th Street & Constitution Ave

Washington, DC 20224

Chris Scott

Keysight Technologies 1400 Fountaingrove Pkway Santa Rosa, CA 95403

Illinois Department of Revenue(BK12

PO Box 64388

Chicago, IL 60664-0338

IRS- Notice PO Box 7346

Philadelphia, PA 19101-7346

IRS-NOTICE GORPOSEL 8048/ Doc 1 PO BOX 21126 Philadelphia, PA 19114

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Joseph Passalino Sr 5104 W Grand Ave #14 Gurnee, IL 60031 Northwestern Memorial Hospital P.O. Box 73690 Chicago, IL 60673-7690

Joseph Passalino Sr 5104 W Grand Ave #14 Gurnee, IL 60031 Paul Fischl DDS 636 Church St Evanston, IL 60201

Lake Forest Health & Fitness 1200 N Westmoreland Lake Forest, IL 60045 Real Time Resolutions Attn: Bankruptcy Po Box 36655 Dallas, TX 75235

Mercedes-Benz Financial Po Box 685 Roanole, TX 76262 Santander Consumer USA Po Box 961245 Ft Worth, TX 76161

Mercedes-Benz Financial Po Box 685 Roanole, TX 76262 Susan Spritz Myers PO Box 383 Glencoe, IL 60022

Midland Credit Mgmt 2365 Northside Drive #300 San Diego, CA 92108 Zwicker & Assocates PC (IL) 7366 N Lincoln Ave #404 Lincolnwood, IL 60712

Midland Funding Attn: Bankruptcy Po Box 939069 San Diego, CA 92193

MRS Associates Inc 1930 Olney Ave Cherry Hill, NJ 08003

Nationwide Credit Inc PO Box 26315 Lehigh Valley, PA 18002-6315